



PTO/SB/22

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

|  |  |                                      |
|--|--|--------------------------------------|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br>FY 2005 |  | Docket Number (Optional)<br>AESN3005 |
|--|--|--------------------------------------|

|                      |  |          |               |
|----------------------|--|----------|---------------|
| In re Application of | Pham, Duc et al.   |          |               |
| Application Number   | 10/016,897   | Filed    | 12.03.2001    |
| For                  | NETWORK MEDIA ENCRYPTION ARCHITECTURE AND METHODS FOR SECURE STORAGE |          |               |
| Group Art Unit       | 2137   | Examiner | Teslovich, T. |

This is a request under the provisions of 37 CFR 1.136(a) to extend the reply in the above identified application.  
The requested extension and fee are as follows (check time period desired and enter the appropriate fees below):

|   | <u>Fee</u> | <u>Small Entity Fee</u> |                  |
|---|------------|-------------------------|------------------|
| _____ One month (37 CFR 1.17(a)(1))         | \$120      | \$60                    | \$ _____         |
| _____ Two months (37 CFR 1.17(a)(2))        | \$450      | \$225                   | \$ _____         |
| <u> X </u> Three months (37 CFR 1.17(a)(3)) | \$1020     | \$510                   | \$ <u>510.00</u> |
| _____ Four months (37 CFR 1.17(a)(4))       | \$1590     | \$795                   | \$ _____         |
| _____ Five months (37 CFR 1.17(a)(5))       | \$2160     | \$1080                  | \$ _____         |

X  Applicant claims small entity status. See 37 CFR 1.27.

\_\_\_\_\_ A check in the amount of the fee is enclosed.

\_\_\_\_\_ Payment by credit card. Form PTO-2038 is attached.

X  The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

X  The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-0890.

I have enclosed a duplicate copy of this sheet.

WARNING: Information on this form may become public. Credit card information should not be included on this form.  
Provide credit card information and authorization on PTO -2038.

I am the \_\_\_\_\_ applicant/inventor

\_\_\_\_\_ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SP/96 ).


X  attorney or agent of record. Registration number: 30,320.

\_\_\_\_\_ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a): 30,320.

January 25, 2006  
Date

650.325.2100  
Telephone Num.

  
Signature

Gerald B. Rosenberg  
Typed Name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

1  Total of  1  forms are submitted.

10016897  
500890  
01/31/2006 PDES1A1 000000026 510.00 DA  
01 FC:2253